STATEMENT OF

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in	(Check if name Example: If typying, typ is changed) over the lines	
Committee to	Re-Elect Trent Franks to Congress	
ADDRESS (number and	PO Box 8105	
(Check if address is changed)	Glendale	AZ 85312 8105
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI (Check if address is changed)	L ADDRESS (Please provide only one e-mail address) doyle@trentfranks.com	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)	www.trentfranks.com	
2. DATE 0 4		
3. FEC IDENTIFICA		-
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A	A)
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, cor TreasurerLisa Teschler	rect and complete
Signature of Treasurer	Electronically Filed by Lisa Teschler	Date 04 / 06 / YYYYYY
NOTE: Submission of fa	se, erroneous, or incomplete information may subject the person signing th	,
Office Use Only	For further inform Federal Election Co Toll Free 800-424-6 Local 202 694 110	ommission FEC FORM I 9530 (Revised 02/2009)